

Exhibit 2



Deposition of:

Kara Corrado

September 10, 2019

In the Matter of:

**Russell, Monique Vs. Educational
Commission For Foreign Medical
Graduates**

Veritext Legal Solutions

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1 as a representative of ECFMG?

2 A. Yes, that's correct.

3 Q. You're providing testimony today
4 in the capacity of a representative of ECFMG?

5 A. Yes.

6 Q. So for clarity sake, I will try
7 to refer, ask questions as refer to ECFMG, but
8 if I happen to say "U" or something like that,
9 if you could just interpret that as referring
10 to ECFMG I'd appreciate that?

11 A. Yes.

12 Q. Do you work at ECFMG?

13 A. Yes.

14 Q. Can you tell us what ECFMG
15 stands for?

16 A. Educational Commission for
17 Foreign Medical Graduates.

18 Q. What is your position there?

19 A. I'm the Vice President for
20 Operations.

21 Q. Is it fair to say you're an
22 officer of ECFMG?

23 MS. McENROE: Objection to form.

24 You can answer, if you know.

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1 residency programs?

2 MS. McENROE: Objection to form.

3 THE WITNESS: So ECFMG has a
4 certification program that is required
5 for entrance into ACGME accredited
6 residency programs.

7 BY MR. THRONSON:

8 Q. Any other ways in which ECFMG
9 severs medical residency programs?

10 MS. McENROE: Objection to form.

11 THE WITNESS: So we also have an
12 exchange visitor sponsorship program. We
13 are responsible for physicians who are
14 seeking residency and training in the
15 United States on a J-1 nonimmigrancy
16 step.

17 BY MR. THRONSON:

18 Q. Beyond the ways in which you
19 serve medical residency programs that you
20 described, how else does ECFMG serve hospitals?

21 MS. McENROE: Objection to form.

22 THE WITNESS: I don't know that
23 I would say that we serve hospitals,
24 however, we do provide a service for

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1 worldwide.

2 So I don't know when the ACGME
3 determined that in order to accept
4 international graduates they would have this
5 requirement of certification; but I think it's
6 important for them from a credentialing
7 perspective to make sure to know what the
8 status of the person is entering their program.

9 Q. Part of ECFMG's mission is to
10 promote public health, correct?

11 A. Part of ECFMG's mission is to
12 promote public health and to protect the
13 public, yes.

14 Q. Is part of ECFMG's mission also
15 to promote patient safety?

16 MS. McENROE: Objection to form.

17 THE WITNESS: ECFMG's mission is
18 broader in terms of what we state about
19 the improvement of the world's health
20 essentially.

21 BY MR. THRONSON:

22 Q. Why is primary-source
23 verification of an applicant's identity and
24 credentials important?

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1 Q. Sure. Do you believe patients
2 have the right to be treated by physicians who
3 did not obtain ECFMG certification through
4 misrepresentations?

5 MS. McENROE: Objection to form.

6 BY MR. THRONSON:

7 Q. That is who obtained ECFMG
8 certification by providing accurate
9 information?

10 MS. McENROE: Objection to form.

11 THE WITNESS: So you're asking,
12 if they have the right not to be; is that
13 what you said? I'm sorry.

14 BY MR. THRONSON:

15 Q. No, it's okay. It's my fault.
16 Do you believe that patients have the right to
17 not be treated by physicians who have obtained
18 ECFMG certification based on false pretenses?

19 MS. McENROE: Objection to form.

20 THE WITNESS: Yes.

21 BY MR. THRONSON:

22 Q. Do you believe in providing the
23 services that we've been discussing to
24 hospitals and residency programs that ECFMG is

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1 on our website and that is given to
2 individuals.

3 The document that I'm referring
4 to that says "draft" is the procedures that
5 staff had been doing probably -- was probably
6 drafted around 2015 time frame, was put to
7 paper in 2015.

8 Q. Did any procedure exist before
9 that time that applied to how the organization
10 should conduct irregular behavior
11 investigations and when the staff should refer
12 matters to the creds committee?

13 A. Yes, those procedures that were
14 documented in 2015 were the procedures that
15 staff had been using at least since I started
16 working directly on cases of irregular
17 behavior, which is 2008 onward, and my
18 understanding would be prior to that as well.
19 I just wasn't working on those cases then.

20 Q. So is it fair to say that up
21 until 2015, those procedures were a custom of
22 the organization in terms of how to conduct
23 investigations and when to refer matters to the
24 committee and then they were written down in

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1 Q. Do you know the names of any of
2 those databases?

3 A. I don't know if we have a name
4 for the database or if there's multiple
5 databases. We have a variety of software
6 programs that we use, and this is saying to
7 make sure we check in each of our lines of
8 service to see if the applicant exists in those
9 lines of service.

10 Q. As a general matter, if a charge
11 letter is sent to an applicant should the
12 matter be referred to the credentials committee
13 for review?

14 MS. McENROE: Objection to form.

15 THE WITNESS: That is our
16 current process.

17 BY MR. THRONSON:

18 Q. How long has that been a
19 process?

20 A. That has been the process at
21 least since I've been working with the
22 credentials committee which is since 2008, and
23 I believe prior to that probably somewhere
24 around the late 90s early 2000s.

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1 graduation date on the diploma.

2 BY MR. THRONSON:

3 Q. How did you obtain source
4 verification from the school?

5 A. For those diplomas?

6 Q. For those diplomas.

7 A. We followed our processes at the
8 time for source verification which was to send
9 a copy of the diploma to the medical school
10 directly with a form for the school official to
11 complete, it's a safety paper form, and a
12 prepaid envelope, -- I'm sorry, it's not a
13 prepaid envelope, but an envelope addressed to
14 ECFMG to be returned to us.

15 Q. At this time, did you also
16 request, we're talking about between 1992 to
17 2000, did you also request verification of
18 whether an individual was registered as a
19 medical practitioner or licensed to practice
20 medicine in his or her home country?

21 A. The credentialing requirements
22 for certification at that time included source
23 verification of the diploma only, and the
24 individual was required to also submit a copy

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1 of their certificate of their full registration
2 or license, but those were not source-verified.

3 Q. Why not?

4 A. I don't know why they were not,
5 but the decision prior to me had been source
6 verification of diploma with a submission of
7 the license, which is not a requirement now.

8 Q. Why did it cease becoming a
9 requirement?

10 A. We introduced a clinical skills
11 assessment examination in 1998, and at that
12 time the organization determined it did not
13 need the license or certificate of registration
14 from an international medical graduate when it
15 introduced a clinic skill assessment which is
16 an in-person exam simulated with patients.

17 Q. It has never been a requirement
18 for international medical graduates applying
19 for ECFMG certification to provide government
20 issued photoed identification, correct?

21 A. It is a requirement to submit
22 photo identification currently, but it was not
23 in the past.

24 Q. When did it become a

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1 Q. When ECFMG received a request
2 like this, would it look anything up in the
3 system about the applicant before granting the
4 request?

5 A. ECFMG would process these in the
6 system, the information you would be looking up
7 would be related to the certification status;
8 keying in the ID number and pulling up the
9 correct record.

10 Q. Is part of that process -- was
11 it the procedure of ECFMG to verify that the
12 applicant's name was consistent between the
13 request for permanent revalidation and the name
14 that was on file for the applicant?

15 A. That was not part of the process
16 that I'm aware of.

17 Q. Was it the process of ECFMG to
18 verify that the date of birth given on the
19 request for permanent revalidation was
20 consistent with the date of birth on file with
21 ECFMG for the applicant?

22 A. Not that I'm aware of.

23 Q. Was there -- did ECFMG have any
24 requirements for its staff as to verifying

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1 have been an admin support for the board or for
2 the committee as well, but I'm not sure what
3 her specific role was.

4 Q. Did ECFMG do anything to
5 determine whether the passport and
6 international driving certified that Akoda
7 provided to ECFMG in 2000 were genuine or
8 authentic?

9 A. Other than their appearance of
10 being genuine or authentic, no.

11 Q. What would it have done to
12 investigate -- what did it do to investigate
13 the appear -- when you say appearance were
14 there particular things that ECFMG assessed
15 from the document?

16 A. My assumption would be that if
17 Dr. Akoda came in with a photocopy of a
18 passport and tried to pass it as an original
19 that would have triggered a question about it.

20 So I don't know that we were
21 looking at any specific details on the
22 passport, but if somebody hands you a passport
23 it looked and felt to Mr. Kelly to be an actual
24 passport and driver's license.

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1 to page two of that. This is an application
2 that Akoda submitted to ECFMG?

3 A. Yes.

4 Q. What's the place of birth listed
5 there?

6 A. Benin City, Nigeria.

7 Q. Those are different cities?

8 A. Yes, that's my understanding.

9 Q. If you turn to Exhibit 15, it's
10 an application that Igberase submitted to
11 ECFMG?

12 A. Yes.

13 Q. Dated, I guess, he signed it
14 10/18/2000 on the last page?

15 A. Yes.

16 Q. Turn to the third page of the
17 application Bates 3467?

18 A. Yes.

19 Q. I'm sorry. The first page of it
20 3465. What's the place of birth that Igberase
21 listed on his application?

22 A. Lagos, Nigeria.

23 Q. Obviously this is an exercise
24 that Mr. Kelly could have done at the time?

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1 word inappropriate, but it wasn't part of
2 our process to go further or to see if
3 some -- I don't know what other
4 organization we could have gone to at the
5 time to see if the two people were the
6 same; if that's what you are asking.

7 BY MR. THRONSON:

8 Q. Could you have consulted with
9 someone from the Nigeria Consulate to determine
10 if the passport was authentic from their
11 perspective?

12 MS. MCENROE: Objection to form.

13 THE WITNESS: I suppose we could
14 have, but that wasn't part of our process
15 at the time.

16 BY MR. THRONSON:

17 Q. Could you have called any of the
18 references that Akoda gave to determine whether
19 the letters of recommendation were authentic?

20 MS. MCENROE: Objection to form.

21 THE WITNESS: We could have, and
22 we may have. I just don't have any
23 documentation in the file that we made
24 the phone calls.

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1 Q. Did you ever reach out to the
2 alleged cousin after Akoda came into the
3 office?

4 A. You mean Igberase?

5 Q. Yeah, and describe the
6 situation, say we have this allegation, Akoda
7 showed up, he says you're his cousin, and used
8 his social security number, is that true?

9 A. I don't believe that we did
10 that.

11 Q. Why not?

12 A. I don't know.

13 Q. So essentially if I understand
14 it, ECFMG's reason for believing that it
15 compared the two files of Akoda and Igberase at
16 the time in 2000, is that that was the standard
17 practice?

18 A. In investigations like that,
19 yes.

20 Q. But there is no direct evidence
21 that you are aware of that that was, in fact,
22 performed?

23 MS. McENROE: Objection to form.

24 THE WITNESS: Correct.

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1 Q. Igberase and Akoda both needed
2 ECFMG certification in order to be able to --
3 strike that. The individual identifying
4 himself as Igberase and Akoda needed ECFMG
5 certification to be able to practice medicine
6 in the United States, correct?

7 MS. McENROE: Objection to form.

8 THE WITNESS: I would say he
9 needed a license to practice medicine,
10 but as an international medical graduate,
11 part of the requirements for him to get
12 into a training program, which would be a
13 requirement for licensure and to take
14 Step 3, was that he have a valid ECFMG
15 certificate.

16 BY MR. THRONSON:

17 Q. So an ECFMG certificate was a
18 necessary condition for him to be able to
19 practice medicine in --

20 MS. McENROE: Objection to form.

21 THE WITNESS: Generally
22 speaking, unless the state board made an
23 exception for him. The state boards, the
24 regulatory authorities, have autonomy and

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1 Q. Are you aware of any other
2 routes, beside through ECFMG certification, by
3 which Akoda could have obtained a license to
4 practice medicine in Maryland?

5 A. Other than the exception process
6 by the licensing board, that I sort of just
7 described, no.

8 Q. Do you know if Maryland has that
9 exception process?

10 A. I do not know.

11 Q. Have you ever spoken with Akoda?

12 A. No, I don't believe so.

13 Q. If ECFMG had believed that the
14 letters of recommendation it received in
15 connection with Akoda's eras*** application,
16 residency application, were not authentic,
17 would ECFMG have had an obligation to inform
18 the residency programs to which he was a part
19 of?

20 MS. McENROE: Objection to form.

21 THE WITNESS: I wouldn't say
22 that we would have an obligation, but if
23 we determine that letters of
24 recommendation were fraudulent, we would

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1 report it to the residency programs. It
2 would be reported to residency programs
3 in general through our official
4 notification process.

5 BY MR. THRONSON:

6 Q. Is the public entitled to have
7 confidence that ECFMG is acting in a reasonably
8 prudent fashion in assessing and verifying the
9 credentials and qualifications of international
10 medical graduates?

11 MS. McENROE: Objection to form;
12 calls for legal conclusion.

13 THE WITNESS: I wouldn't say
14 that they're entitled. I would say that
15 they may have an expectation that ECFMG
16 or any organization is following its
17 procedures appropriately et cetera.

18 BY MR. THRONSON:

19 Q. Should they have that
20 confidence?

21 MR. McENROE: Objection to form.

22 THE WITNESS: I mean, yes, I
23 think they could have that expectation.

24 BY MR. THRONSON:

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1 A. That is the Federation of State
2 Medical Boards.

3 Q. Is that an entity under ECFMG's
4 control?

5 A. No.

6 Q. That's a separate entity?

7 A. Yes.

8 Q. Thank you.

9 I have no further questions of
10 this witness.

11 MR. THRONSON: Just a few follow
12 ups to echo a few of Counsel's questions.

13 - - -

14 REDIRECT EXAMINATION

15 - - -

16 BY MR. THRONSON:

17 Q. Is it ECFMG's expectation that
18 state medical boards will rely on reports of
19 ECFMG certification status for any purpose?

20 A. Yes. To meet the requirement
21 that the board might have for ECFMG
22 certification.

23 Q. Is it ECFMG's expectation that
24 residency programs, such as that at Howard

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1 University, would rely on ECFMG status for any
2 purpose?

3 A. Yes, to demarcate that that
4 person met the certification so they could
5 enter GME among whatever other requirements the
6 program had.

7 Q. It is ECFMG's expectation that
8 hospitals that are considering whether to grant
9 clinical privileges to a physician rely on
10 ECFMG status for any purpose?

11 A. I think it would be fair to say
12 that they have the same expectation as the
13 licensing board and the residency programs have
14 on the status reports; on ECFMG providing
15 information about certificate status.

16 Q. The status report that was
17 provided to the Howard residency program
18 regarding Akoda, what was all the information
19 that that status report contained?

20 A. The status report would contain,
21 his name; his USMLE identification number; his
22 medical school; the year he graduated; the
23 country of medical school; the validity of his
24 ECFMG certificate, what the status is; whether